

Set Available Copy

<b>CLAIMS ONLY</b>							SERIAL NO.		FILING DATE				
							APPLICANT(S)						
<b>CLAIMS</b>													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.							
1							51						
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47							97						
48							98						
49							99						
50							100						
TOTAL IND.	4		↓		↓		TOTAL IND.	↓		↓		↓	
TOTAL DEP.	22		↓		↓		TOTAL DEP.	↓		↓		↓	
TOTAL CLAIMS	36		↓		↓		TOTAL CLAIMS	↓		↓		↓	

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS